

DEPARTMENT OF HEALTH SERVICES
COUNTY OF LOS ANGELES

(PARAMEDIC/MICN)
REFERENCE NO. 416

SUBJECT: **ASSESSMENT UNIT**

PURPOSE: To provide a mechanism for approved primary provider agencies in Los Angeles County to provide early assessment and initial lifesaving therapy to patients by a paramedic prior to the arrival of an ALS unit.

DEFINITION: An Assessment Unit is an emergency response unit utilized by an approved primary provider agency which complies with the operational criteria outlined in this policy.

PRINCIPLE: Assessment Units may be used only by approved paramedic provider agencies or primary provider agencies that contract with an approved paramedic provider.

POLICY:

I. Assessment Unit Approval

- A. The provider agency shall submit a request for approval, in writing, to the Director of the Los Angeles County EMS Agency. The request must include the following:
1. Description of need.
 2. Identification, location, and average response times of the ALS Unit assigned to the geographic area.
 3. Assigned geographical area of proposed Assessment Unit.
 4. Proposed identification and location of Assessment Unit, include whether the unit will be designated as full-time (24 hours 7 days a week) or part-time (based on staff availability).
 5. Description of Assessment Unit staffing.
 6. A statement indicating whether an approved paramedic radio and/or alternative mechanism to establish base hospital contact will be included in the inventory.
 7. A mechanism for direct field observation by the EMS Agency and base hospital personnel.
 8. Desired implementation date.

EFFECTIVE: 1-5-88

REVISED: 6-30-15

SUPERSEDES: 07-01-14

APPROVED:


Director, EMS Agency


Medical Director, EMS Agency

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B. The EMS Agency will:

1. Assign the proposed unit(s) to a base hospital.
2. Perform an inventory, as outlined in Ref. No. 704, Assessment Unit Inventory, of the proposed assessment unit(s).
3. Conduct a brief orientation for department personnel, reviewing the staffing and operational requirements outlined in this policy.
4. Submit a written response to the requesting provider agency within five (5) working days after the inventory is successfully completed, to approve or deny the proposed assessment unit(s).

II. Staffing/Equipment Requirements

- A. Staffing, at a minimum, shall include one paramedic accredited in Los Angeles County and one EMT.
- B. Assessment Units shall be equipped with standardized inventory specified in Ref. No. 704, Assessment Unit Inventory. This equipment must be secured for use by Assessment Unit paramedic personnel only.

III. Operational Requirements

- A. For ALS patient responses, the closest available ALS Unit shall be dispatched simultaneously with an Assessment Unit.
- B. If the Assessment Unit arrives on scene prior to the ALS Unit, the paramedic shall:
 1. Assess the patient.
 2. Institute basic life support and first aid procedures if indicated.
 3. Institute patient care as per Ref. No. 806.1, Procedures Prior to Base Contact (Field Reference).
 4. Transfer care of patients to paramedics on the ALS Unit upon their arrival; assist as needed.
 5. Cancel ALS Unit if ALS services are not required.
- C. An ALS Unit should never be canceled by an Assessment Unit if the patient meets Ref. No. 808, Base Hospital Contact and Transport Criteria, Section I, or appears to need ALS intervention, or if ALS intervention has been initiated.

EXCEPTIONS:

1. If emergency ambulance transportation (ground or air) is on scene prior to the arrival of the ALS Unit AND the patient's condition warrants

immediate rapid transport, transportation should NOT be delayed to await the arrival of the ALS Unit (e.g., major trauma).

In such instances, the Assessment Unit paramedic or paramedics in the transportation vehicle should accompany the patient to the hospital. The base hospital shall be contacted en route. (The base hospital will contact the receiving hospital.) When, for whatever reason, base hospital contact cannot be made, the destination of patients will be made by the paramedic in accordance with Ref. No. 502, Patient Destination.

2. If the patient is refusing care and transport, if indicated according to Ref. No. 808, Base Hospital Contact and Transport Criteria, and the paramedic is able to establish communications with the base hospital to document AMA, the ALS Unit may be canceled.

D. Assessment Unit Deployed with Strike Teams:

1. The assessment unit *primary* responsibility is providing assessment and treatment of strike team members in the absence of a FireLine EMT-Paramedic *in congruence with the Incident Medical Plan*.
2. *While emergency medical care for civilians (general public) is still the responsibility of the local EMS system and or the Incident's Medical Group, it is appropriate for the FEMT/FEMP to provide emergency medical care to injured civilians encountered during a strike team assignment.*
3. The Assessment Units shall notify the Medical Alert Center at (562) 347-1739 at the time of their deployment and demobilization.
4. The Assessment Unit paramedic shall complete an EMS Report Form for every patient encounter during the deployment. The completed EMS Report Form shall be submitted to the Los Angeles County EMS Agency and a copy to the jurisdictional EMS Agency at the conclusion of the deployment.
5. The assessment unit paramedic will function within Ref. No. 806.1. When communication capability is available, the Medical Alert Center (MAC) shall be contacted at (562) 347-1739 for the EMS Agency Medical Director or designee approval for all procedures.

- E. Each Assessment Unit will be assigned to a base hospital. The base hospital shall provide all services normally offered to assigned ALS Units. Assessment Units are not authorized to utilize the Los Angeles County Standing Field Treatment Protocols (SFTP).

IV. Monitoring/Evaluation Requirements

The provider agency must provide:

- A. A mechanism for direct field observation of the Assessment Unit by EMS Agency and base hospital personnel.
- B. A mechanism to educate EMS personnel on appropriate required documentation, to include identification of the Unit as ALS (when unit is staffed with a paramedic) or BLS (when paramedic staffing is not available).
- C. A mechanism to monitor appropriate required documentation as part of the provider agency's quality improvement program that is auditable by the EMS Agency.

CROSS REFERENCES:Prehospital Care Manual:

Ref. No. 304, **Role of the Base Hospital**
Ref. No. 502, **Patient Destination**
Ref. No. 704, **Assessment Unit Inventory**
Ref. No. 804, **Fireline Emergency Medical Technician-Paramedic (FEMP)**
Ref. No. 806.1, **Procedures Prior to Base Contact, Field Reference**
Ref. No. 808, **Base Contact and Transport Criteria**